

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee ASG Marketing			Date M M / D D / Y Y Y Y Y Y Y Y 08 / 13 / 2012		
Mailing Address 1600 Amphitheatre Pkwy			Amount 7922.15		
City Mountain View		State CA	Zip Code 94043		
Purpose of Expenditure IE-Flake-Email List Rental		Category/ Type 003		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: JEFF FLAKE				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18421.15			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee ASG Marketing			Date M M / D D / Y Y Y Y Y Y Y Y 08 / 13 / 2012		
Mailing Address 1600 Amphitheatre Pkwy			Amount 4000.00		
City Mountain View		State CA	Zip Code 94043		
Purpose of Expenditure IE-Flake-Online Ads		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: JEFF FLAKE				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22421.15			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			11922.15		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;"> Lisa Lisker [Electronically Filed] Date M M / D D / Y Y Y Y Y Y Y Y 08 / 14 / 2012 </p> <p>Signature _____</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SENATE CONSERVATIVES FUND			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee SENATE CONSERVATIVES FUND			Date M M / D D / Y Y Y Y Y Y 08 / 11 / 2012		
Mailing Address 228 S. WASHINGTON ST., STE. 115			Amount 427.65		
City ALEXANDRIA		State VA		Zip Code 22314	
Purpose of Expenditure IE-Flake-Online Processing		Category/Type 003		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: JEFF FLAKE				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 10499.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee			Date M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State		Zip Code	
Purpose of Expenditure		Category/Type 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:				Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			427.65		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....			12349.80		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Lisa Lisker		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 08 / 14 / 2012	